

**Colorado Medical Board**

**Rules and Regulations Regarding the Demonstration of Continued Competency  
by Anesthesiologist Assistant Applicants for Licensure, Reinstatement, or  
Reactivation of a License**

**INTRODUCTION**

**BASIS:** The authority for promulgation of these rules and regulations by the Colorado Medical Board("Board") is set forth in Sections 24-4-103, 12-36-114.5, 12-36-104(1)(a), 12-36-116(1)(d), 24-34-102(8)(d)(II) and 12-36-137(5), C.R.S.

**PURPOSE:** The purpose of these rules and regulations is to set forth the process by which an anesthesiologist assistant may demonstrate continued competency for the purpose of complying with the statutory sections referenced above to obtain a Colorado anesthesiologist assistant license or to reinstate or reactivate an existing Colorado anesthesiologist assistant license. The Board finds that due to the significant differences between the nature of anesthesiologist assistant practice and the nature of physician practice, it is necessary and appropriate to delineate different methods by which anesthesiologist assistants and physicians shall demonstrate continued competency as required by the Medical Practice Act. The significant differences between the two types of practice include the requirements that anesthesiologist assistants must be supervised by a licensed physician in accordance with existing Board rules and regulations. The Board finds, however, that if an anesthesiologist assistant has ceased clinical practice for two or more years, the nature of the anesthesiologist assistant/physician supervisory relationship in and of itself cannot compensate for potential knowledge and clinical deficiencies, which may exist due to the lack of practice experience for such an extended period of time.

**REQUIREMENTS:** To demonstrate continued competency for purposes of complying with Sections 12-36-116(1)(d), 24-34-102(8)(d)(II), or 12-36-137(5), C.R.S., an anesthesiologist assistant must either:

1. Submit proof satisfactory to the Board of active practice as an anesthesiologist assistant in another jurisdiction for the two year period immediately preceding the filing of the application. (If the anesthesiologist assistant has practiced as an anesthesiologist assistant for only a portion of the two year period immediately preceding the filing of the application, the Board may determine on a case by case basis in its discretion whether the anesthesiologist assistant has adequately

demonstrated continued competency to practice as an anesthesiologist assistant.) or,

2. Submit to the Board the following: (a) proof satisfactory to the Board that the anesthesiologist assistant has been out of practice as an anesthesiologist assistant for less than four years; (b) proof of current certification by the National Commission on Certification of Anesthesiologist Assistants (“NCCAA”); (c) proof of 100 hours of continuing medical education within the past two years, including 25 hours of category I continuing medical education in the past twelve months; and (d) a written plan satisfactory to the Board, documenting the nature, extent, and duration of supervision that will be provided by the supervising physician to the anesthesiologist assistant as the anesthesiologist assistant makes the transition back into clinical practice; or,

3. For those anesthesiologist assistants who have been out of practice as an anesthesiologist assistant for four or more years, (a) submit to the Board a personalized competency evaluation report prepared by a program approved by the Board, and (b) complete any education and/or training recommended by the program as a result of the evaluation prior to obtaining a license. In the discretion of the Board, the anesthesiologist assistant may be able to receive a re-entry license prior to completing the education and/or training recommended by the program for the purpose of facilitating the completion of such education and/or training. All expenses resulting from the evaluation and/or any recommended education and/or training are the responsibility of the anesthesiologist assistant and not of the Board.

Where appropriate, the Board may determine that demonstration of continued competency requires an additional or different approach. For example, due to the length of time the anesthesiologist assistant has been out of practice, the Board may require a written plan documenting the nature, extent, and duration of supervision that will be provided by the supervising physician to the anesthesiologist assistant as the anesthesiologist assistant makes the transition back into clinical practice. This written plan may be in addition to the personalized competency evaluation and/or recommended education and/or training. The decision as to the method of determining continued competency shall be at the discretion of the Board.

Adopted 5/22/14: Effective 7/15/14.